

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-------------|--------|----------|
| FEE DETERMINATION | <i>h. G</i> | | 9/16/00 |
| O.I.P.E. CLASSIFIER | | 43 | 9/20/00 |
| FORMALITY REVIEW | | 71622 | 10-23-00 |
| RESPONSE FORMALITY REVIEW | | | |

TEST AVAILABLE COPY

INDEX OF CLAIMS

| | | | |
|---|--------------------------------|---|--------------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - | (Through numeral).... Canceled | A | Appeal |
| + | Restricted | O | Objected |

| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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